Fill in this information to identify the case:		
Debtor 1 Jennifer L. Williams		
Debtor 1 Jennifer L. Williams	<del></del>	
Debtor 2 (Spouse, if filing)	<del></del>	
United States Bankruptcy Court for the: Eastern District of Michigan		
Case number 16-47976		
Official Form 410S2		
	a Evnances and Cha	<b>1000</b>
Notice of Postpetition Mortgage Fee	s, expenses, and cha	rges 12/16
If the debtor's plan provides for payment of postpetition contractual insta debtor's principal residence, you must use this form to give notice of any filing that you assert are recoverable against the debtor or against the de	fees, expenses, and charges incurred after	
File this form as a supplement to your proof of claim. See Bankruptcy Rule	3002.1.	
DEUTSCHE BANK NATIONAL TRUST COMPANY, as		
Trustee for MORGAN STANLEY ABS CAPITAL I INC. TRUST 2003-NC6, MORTGAGE PASS-THROUGH Name of creditor: CERTIFICATES, SERIES 2003-NC6	Court claim no. (if known):	11
Name of creditor: CERTIFICATES, SERIES 2003-NC6	Court Claim No. (II Known).	11
Last 4 digits of any number you use to identify the debtor's account:  9 3 3 3		
Does this notice supplement a prior notice of postpetition fees,		
expenses, and charges?		
□ No		
Yes. Date of the last notice: 11/15/2016		
Part 1: Itemize Postpetition Fees, Expenses, and Charges		
		, .,, <u>,</u>
Itemize the fees, expenses, and charges incurred on the debtor's mortguescrow account disbursements or any amounts previously itemized in a		
approved an amount, indicate that approval in parentheses after the date	e the amount was incurred.	
Description	Dates incurred	Amount
1. Late charges	(1)	\$
2. Non-sufficient funds (NSF) fees	. (2)	\$
3. Attorney fees	(3)	\$
4. Filing fees and court costs	(4)	\$
Bankruptcy/Proof of claim fees	(5)	\$
6. Appraisal/Broker's price opinion fees	(6)	\$
7. Property inspection fees	(7)	\$
8. Tax advances (non-escrow) – 2015 / 2016	3/27/2017 (8)	\$ <u>7,594.77</u>
9. Insurance advances (non-escrow)	(9)	\$
10. Property preservation expenses. Specify:	(10)	\$
11. Other. Specify: Insurance Disbursement	(11)	\$
12. Other. Specify:	(12)	\$
13 Other Specify:	/13\	\$

The debtor or trustee may challenge whether the fees, expenses, and charges you listed are required to be paid. See 11 U.S.C. § 1322(b)(5) and Bankruptcy Rule 3002.1.

14. Other. Specify:

Jennifer L. Williams First Name

Middle Name

Last Name

Part 2:	Sign Here				
The perso		Sign and p	rint your nam	ne and	your title, if any, and state your address and
Check the	appropriate box.				
☐ I am tl	he creditor.				
☐ I am tl	he creditor's authorized agent.				
	under penalty of perjury that the in owledge, information, and reasonal // /S/ Signature Trott # 459332B02			Date	8.7.1
Print:	Shawn C. Drummond (P	58471)		Title	Attorney for DEUTSCHE BANK NATIONAL TRUST COMPANY, as Trustee for MORGAN STANLEY ABS CAPITAL I INC. TRUST 2003-NC6, MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2003-NC6
Filing.	First Name Middle Name	Last Name		1106	NCO
Company	Trott Law, P.C.				
Address	31440 Northwestern Hwy Ste. 200 Number Street Farmington Hills, MI 48334-5422				
	City	State	ZIP Code		

Contact phone 248.642.2515

Email EasternECF@trottlaw.com

Official Form 410S2

### ERIC R. SABREE

WAYNE COUNTY TREASURER 400 Monroe - 5th Floor Detroit MI 48226-2942 (313) 224-5990



Ocwen Financial 1661 Worthington Road West Palm Beach, FL 33409 **Web:**treasurer.waynecounty.com **Email:**taxinfo@co.wayne.ml.us

## DUPLICATE

# Tax Receipt

Receipt Number: Bundle:				Date: Interest Effective Date:			03/27/17 03/27/17
Receipt Details: Municipality - Parcel ID	<u>Tax Year</u> 2015	<u>Paid Tax</u> \$2,651.84	<u>Paid Int &amp; Fees</u> \$450.81	Paid Total \$3,102.65	<u>Due Tax</u> \$0.00	Due Int & Fees \$0.00	<u>Due Totai</u> \$0.00
6431 CADILLAC	2016	\$4,278.21	\$213.91	\$4,492.12	\$0.00	\$0.00	\$0.00
			Total:	\$7,594.77		Through 04/30/17	\$0.00
			Receipt Total:	\$7,594.77			

Remarks:

THE MOST RECENT YEAR TAXES SHOWN ON THIS RECEIPT ARE SUBJECT TO CHANGE

Summary Information:

Date Created: 03/27/17 03:39:21 PM Issued By: 3248 Date Printed: 06/07/17 08:00:18 PM Type: Mail

Dear Fellow Taxpayer:

Thank you for your payment of property taxes. This payment supports Wayne County, your local community, and other government agencies in providing essential government services. Your payment is really greatly appreciated.

Sincerely,

ERIC R. SABREE

Wayne County Treasurer

Page 1 of 1

AITNO -DEUTSCHE BANK NATIONAL TRUST COMPANY, as Trustee for MORGAN STANLEY ABS CAPITAL I INC. TRUST 2003-NC6, MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2003-NC6

## **DECLARATIONS**

CERTIFICATE NUMBER:

## STANDARD GUARANTY INSURANCE COMPANY

PO BOX 50355, ATLANTA, GA 30302

MIP 221 SG (01-12)

_		, <del></del>	,
٨	Stock	Incurance	Company

CERTIFICATE PERIOD:			TION 6	Issued under the provisions of	:
EFFECTIVE DATE	EFFECTIVE TIME		ATION DATE	Master Policy No.:	
10/15/2016	12:01 am	10/1	5/2017		
NAMED INSURED and Mail	ing Address:			For Company Use:	
OCWEN LOAN SERVICING				Basis: Territory: 0002	
ITS SUCCESSORS AND/O				Class:	
P.O. BOX 6723	6772			Other:	
SPRINGFIELD, OH 45501	-0/23				
		<del></del>	·		
	The property covered	by this Certificate	is at the describ	ed location unless otherwise stated:	
6431 CADILLAC ST					
GARDEN CITY, MI 48135					
COVED ACE AREA HARE	OF HABILITY C	warana ie ara i	ded only who	ere a premium is shown for the	coverage subject
to all conditions of this		werage is provi	ueu only whe	ae a premium is shown for the	coverage, subject
RESIDENTIAL PROPERTY					
LIMIT OF LIABILIT			DEDUCTIE	N FS	PREMIUM
<u>LIMIT OF LIABILIT</u> Coverage A - \$99,000	<u>!</u>	All Perils:	\$1,000		\$1,609.00
Coverage A - \$99,000 Coverage B - 10% of Cov	erage A	AU PELIIS:	\$ 1,000	,	⊋1, <del>007,00</del>
				TOTAL PREMIUM	\$1,609.00
COMMEDIAL DDOGEDT	٧.			/	, , == = =
COMMERCIAL PROPERT			DEDUCTIE	N FC	PREMIUM
<u>LIMIT OF LIABILIT</u> Building -	. L	All Perils:	DEDOC HE		I LYCIAHOIM
· · · · · · · · · · · · · · · · ·					
				TOTAL PREMIUM	
•				A STATE OF THE STA	
سد و پر س			المناف المنافرات	1 3 3	
Optional Coverages, Ass	essments, Surcha	rges, Taxes, Fe	es (if applica	ble):	
Ay 1					
		•		TOTAL AMOUNT	\$1,609.00
	mis same I · ·		د مخدد موردر		\$1,007.00
		•		e at the time of issuance:	
MIP 223 SG (01-12),MIP	233 (01-12),MIP 2	43 MI (03-12),M	IP 219 (01-12	Z),MIP 239 (01-12)	ļ
BORROWER - Name and	address:				
JENNIFER L WILLIAMS	audi Coo.	-			1
43695 MICHIGAN AVE					
C/O JOHN EVANCHEK					
CANTON TOWNSHIP, MI	48188				
				Loan No.:	
TI ALLIC. 4 OOD (ED 40/7					ue Date: 01/27/2017
CLAIMS: 1-800-652-1262				ISS	ue Date: VI/Z//ZVI/
ALL OTHER INQUIRIES:	· 				
-866-317-7661		Countersignal	ture (where r	equired)	

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MIP221SGR-0614